



CANDIDATE COMMITTEE COVER PAGE

FOR OFFICIAL USE ONLY

Report must be legible, typed or printed in ink and signed by the treasurer (or designated record keeper) and candidate.

3. This Statement covers From: 11/25/2008 To: 12/31/2009
Mo Day Year Mo Day Year

1. Committee I.D. Number 150331		4. Candidate Last Name Begick		First Name Vaughn		M.I. M.I.	
2. Committee Name Committee to Elect Vaughn J. Begick Commissioner		4a. Office Sought Including District # or Community Served (If applicable) To Be Determined 3rd Dist Bay Co					
		4b. County of Residence Bay		Driver License # (Optional)			
5. Committee's Mailing Address 522 N Madison Bay City MI 48708 Area Code and Phone (989) 894-5007		6. Treasurer's Name & Residential Address John Nyquist 311 N Grant Bay City MI 48708 Area code & Phone (989) 894-5394 Driver License # (Optional)					
7. Treasurer's Business Address 522 N MADISON AVE Bay City MI 48708 Area Code and Phone (989) 894-5007		8. Designated Recordkeeper's Name and Mailing Address (If the committee has a Designated Recordkeeper) Margie Begick 5353 Lorraine Court Bay City MI 48706 Area Code and Phone (989) 686-0578 Driver License # (Optional)					
9. TYPE OF STATEMENT 9a. <input type="checkbox"/> Pre-Election OR 9b. <input type="checkbox"/> Post-Election Pre-Election or Post-Election Statement relates to: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Convention <input type="checkbox"/> School <input type="checkbox"/> Special <input type="checkbox"/> Caucus Date of Election, Convention or Caucus Month Day Year				9c. <input checked="" type="checkbox"/> Annual Statement (<u>2009</u> Coverage Year) 9d. <input type="checkbox"/> Amendment to Campaign Statement (Complete Item 9a, 9b, 9c or 9e to indicate which Statement is being amended) 9e. <input type="checkbox"/> Dissolution of Candidate Committee Effective Date of Dissolution Mon Day Year By checking this item, I certify that the committee has no assets or outstanding debts, including late filing fees. Note: The disposition of residual funds must be reported on Schedule 1B and the Summary Page.			
<p>A committee that does not have a Reporting Waiver must file all required Campaign Statements. The Campaign Statements must include all applicable Schedules. Direct contributions, in-kind contributions, loans, expenditures, and outstanding debts count against the \$1,000 Reporting Waiver threshold. If any of the information listed in items 2, 4, 5, 6, 7, or 8 has changed since the information was shown on the committee's Statement of Organization, an amendment to the Statement of Organization should accompany this Campaign Statement. If a request for a Reporting Waiver is not received on or before the filing deadline of a required campaign statement, that campaign statement can not be waived.</p>							
10. Verification: I certify that all reasonable diligence was used in the preparation of this statement and attached schedules (if any) and to the best of my knowledge and belief the contents are true, accurate and complete.							
Current Treasurer or Designated Recordkeeper		John Nyquist Type or Print Name		Signature 		Date 1-19-10 Mo Day Year	
Candidate		Vaughn Begick Type or Print Name		Signature 		Date 1-19-10 Mo Day Year	

Authority granted under P.A. 388 of 1976



MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

**SUMMARY PAGE
CANDIDATE COMMITTEE**

RECEIPTS		Column I This Period	Column II Cumulative this election cycle
3. Contributions			
a. Itemized (Schedule 1A - Column 6)	(3a.) \$	<u>3297.00</u>	
b. Unitemized (less than \$20.01 each - no Schedule)	(3b.) \$	<u>0.00</u>	
c. Subtotal of "Contributions"	(3c.) \$	<u>3297.00</u>	(18.) \$ <u>3297.00</u>
4. Other Receipts (Schedule 1A -1, Column 6)	(4.) \$	<u>0.00</u>	(19.) \$ <u>0.00</u>
5. TOTAL CONTRIBUTIONS AND OTHER RECEIPTS (Add Line 3c + Line 4)	(5.) \$	<u>3297.00</u>	(20.) \$ <u>3297.00</u>
IN-KIND CONTRIBUTIONS & EXPENDITURES			
6. In-Kind Contributions (Schedule 1-IK, Column 7)	(6.) \$	<u>0.00</u>	(21.) \$ <u>0.00</u>
7. In-Kind Expenditures (Schedule 1B-IK, Column 6)	(7.) \$	<u>0.00</u>	(22.) \$ <u>0.00</u>
EXPENDITURES			
8. Expenditures			
a. Itemized (Schedule 1B, Column 6)	(8a.) \$	<u>2238.47</u>	
b. Itemized Get-Out-the-Vote (Schedule 1B-G)	(8b.) \$	<u>0.00</u>	
c. Unitemized (less than \$50.01 each - no Schedule)	(8c.) \$	<u>0.00</u>	
9. TOTAL EXPENDITURES (Add Line 8a + Line 8b + Line 8c)	(9.) \$	<u>2238.47</u>	(23.) \$ <u>2238.47</u>
INCIDENTAL EXPENSE DISBURSEMENTS (Officeholders Only)			
10. Disbursements			
a. Itemized (Schedule 1C, Column 6)	(10a.) \$	<u>0.00</u>	
b. Unitemized (less than \$50.01 each - no Schedule)	(10b.) \$	<u>0.00</u>	
11. TOTAL INCIDENTAL EXPENSE DISBURSEMENTS (Add Line 10a + Line 10b)	(11.) \$	<u>0.00</u>	(24.) \$ <u>0.00</u>
DEBTS AND OBLIGATIONS			
12. Debts and Obligations			
a. Owed by the Committee (Schedule 1E)	(12a.) \$	<u>0.00</u>	
b. Owed to the Committee (Schedule 1E)	(12b.) \$	<u>0.00</u>	
BALANCE STATEMENT			
13. Ending Balance of last report filed (Enter zero if no previous reports have been filed.)	(13.) \$	<u>67.99</u>	
14. Amount received during reporting period (Line 5, Total Contributions & Other Receipts)	(14.) +	<u>3297.00</u>	
	(15.) =	<u>3364.99</u>	
15. SUBTOTAL Add Lines 13 and 14			
16. Amount expended during reporting period (Add lines 9 and 11)	(16.) -	<u>2238.47</u>	
17. ENDING BALANCE (Subtract line 16 from line 15)	(17.) \$	<u>1126.52</u>	*

NOTE: Direct contributions, in-Kind contributions, loans, expenditures and outstanding debts count against the \$1,000.00 Reporting Waiver threshold.

All required schedules must be included with this statement. *If your ending balance is negative, please recheck your math.



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 1 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/13/2009</u> Name: Terrence Kelly Address: 164 Bay Shore Drive Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 2 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/14/2009</u> Name: Susan Ford Address: 121 Darley Avenue Auburn MI 48611 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 3 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/14/2009</u> Name: William Gregory Address: 264 Jennison Place Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # 4 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/17/2009</u> Name: Lucille Martin Address: 2941 Chrysler Drive Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	20.00	20.00
Page Subtotal	65.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>5</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/19/2009</u> Name: Paul Begick Address: 5852 S. 4 Mile Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>6</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/19/2009</u> Name: Virley Herbolzheimer Address: 3086 Hotchkiss Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>7</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/21/2009</u> Name: Robert Bloenk Address: 231 Jennison Place Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>8</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/21/2009</u> Name: Michael Bouckaert Address: 2981 E Midland Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal	85.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>9</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/21/2009</u> Name: Ross Whitman Address: 3027 Canterbury Dr Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>10</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/23/2009</u> Name: Joseph Davis Address: 909 N Wenona Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>11</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/24/2009</u> Name: Jody Meagher Address: 3873 Utah Drive Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100.00	100.00
3. Contribution # <u>12</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/24/2009</u> Name: Manuel Perea Address: 841 Foxboro Saginaw MI 48603 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	100.00	100.00
Page Subtotal	235.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>13</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>02/26/2009</u> Name: <u>Helen Woods</u> Address: <u>1200 McKinley</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>14</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/02/2009</u> Name: <u>Howard Helmreich</u> Address: <u>2727 Ziegler Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>15</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/04/2009</u> Name: <u>Loren Appold</u> Address: <u>2684 Delta Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>16</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/10/2009</u> Name: <u>Vaughn Begick</u> Address: <u>5353 Lorraine Court</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	90.00	90.00
Page Subtotal	160.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
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3. Contribution # <u>17</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/10/2009</u> Name: Roy Schwab Address: 2516 Delta Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>18</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Rick Ahlberg Address: 714 S Birney Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>19</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Alvin Appold Address: 6243 Three Mile Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>20</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Bill Appold Address: 3690 Stone Island Rd Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal	55.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>21</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Deloris Appold</u> Address: <u>3690 Stone Island</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>22</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Eldor Appold</u> Address: <u>2301 E. Htchkiss</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>23</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Eldor Appold</u> Address: <u>2301 E. Htchkiss</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	40.00
3. Contribution # <u>24</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Julia Appold</u> Address: <u>50 Christopher Ct.</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal	60.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>25</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Marcia Bacon</u> Address: <u>2481 Old Bridge</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>26</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Aaron Bayliss</u> Address: <u>1332 S. Finn Rd.</u> <u>Munger MI 48747</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>27</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>James Begick</u> Address: <u>3070 Hotchkiss</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # <u>28</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Norbert Begick</u> Address: <u>6242 3 Mile Road</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal	90.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
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Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>29</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Vaughn Begick</u> Address: <u>5353 Lorraine Court</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Physician Assistant</u> Employer <u>Dr James LaFleur</u> Business Address <u>3400 N Center Rd</u> <u>Saginaw MI 48603</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	45.00	135.00
3. Contribution # <u>30</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Armond Beiser</u> Address: <u>6597 S. 3 Mile Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>31</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Armond Beiser</u> Address: <u>6597 S. 3 Mile Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	40.00
3. Contribution # <u>32</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Rollan Berger</u> Address: <u>6962 S. Three Mile Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal	95.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
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Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>33</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Nathan Bickel</u> Address: <u>715 South Sheridan. St.</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	12.00	12.00
3. Contribution # <u>34</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Amy Carl</u> Address: <u>559 Franconian Drive East</u> <u>Frankenmuth MI 48734</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>35</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>James Carlea</u> Address: <u>1028 Hampstead Rd.</u> <u>Essexville MI 48732</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>36</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Don Chevalier</u> Address: <u>958 N. Jones Rd</u> <u>Essexville MI 48732</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal	42.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>37</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Don Chevalier Address: 958 N. Jones Rd Essexville MI 48732 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	20.00
3. Contribution # <u>38</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Don Chevalier Address: 958 N. Jones Rd Essexville MI 48732 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	30.00
3. Contribution # <u>39</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Don Chevalier Address: 958 N. Jones Rd Essexville MI 48732 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	40.00
3. Contribution # <u>40</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Chuck Cusick Address: 3287 Parkway Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal	40.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>41</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Hilda Dijak</u> Address: <u>6780 S. 3 Mile Road</u> <u>Bay City MI</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>42</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Bruce Douglas</u> Address: <u>4622 Mocasa Ct</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>43</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Bill Duncan</u> Address: <u>3198 Arnold Ct.</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>44</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Bill Duncan</u> Address: <u>3198 Arnold Ct.</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	40.00
Page Subtotal	70.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>45</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: David Duyck Address: 969 Arms Rd. Essexville MI 48732 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>46</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Cindy Eastman Address: 2430 Salzburg Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>47</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Al Eichhorn Address: 2240 Weiss st Saginaw MI 48602 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>48</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Gene Engerer Address: 1401 Delta Rd. Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal	50.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 49 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: James Fox Address: 3527 Kawkawlin River Drive Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 50 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Jay Fox Address: 1314 S Chilson Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # 51 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Charles Gerhauser Address: 511 Delta Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 52 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Larry Hair Address: 2347 Amelith Rd. Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
Page Subtotal	60.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>53</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Howard Helmreich Address: 2727 Ziegler Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	45.00
3. Contribution # <u>54</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Ruth Hirt Address: 5353 Lorraine Ct. Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	0.00	0.00
3. Contribution # <u>55</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Robert Horn Address: 414 Nebobish Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>56</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Howard Hurt Address: 3720 Katalin Court Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
Page Subtotal	50.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>57</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Art Joitke</u> Address: <u>4244 Two Mile Rd.</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>58</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Lois Joitke</u> Address: <u>4244 Two Mile Rd</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>59</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Dolores Kalmbach</u> Address: <u>7420 Canada Rd.</u> <u>Birch Run MI 48415</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>60</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Karen Karbowski</u> Address: <u>727 Bay Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
Page Subtotal	50.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

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3. Contribution # 61 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Pat Kendall Address: 2616 Delta Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # 62 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Thomas Kernstock, DDS Address: 401 Hill Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # 63 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Robert Klimmek Address: 2922 Engelhardt Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # 64 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Bill Kramer Address: 5682 Michael Drive Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal	70.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

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3. Contribution # 65 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Frank Linzner Address: 2953 Ziegler Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 66 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Herb Matthes Address: 2949 Thunderbird Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	35.00	35.00
3. Contribution # 67 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Ronald Monville Address: 2849 E Westwood Dr Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 68 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Tom Mueller Address: 3938 Bush Drive Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal	80.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 69 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Sandra Murray Address: 1906 33rd Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 70 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Jess Ontiveros Address: 2330 Stobbe Saginaw MI 48603 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # 71 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Dennis Poirier Address: 509 Center Avenue Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 72 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Bill Powell Address: 5277 Crestway Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal	50.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>73</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Robbie Rankey</u> Address: <u>4758 Spitler</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>74</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>James Reichard</u> Address: <u>6946 Mackinaw Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>75</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Frederick Reinig</u> Address: <u>5664 MacIntoch Dr</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # <u>76</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: <u>Jim Ruthig</u> Address: <u>4822 Basswood</u> <u>Saginaw MI</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
Page Subtotal	105.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
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Enter contributor's name and address. If contribution if from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>77</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Bob Sarow Address: 1111 N. Water St. #201 Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>78</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Herb Schmidt Address: 6334 W.S. Saginaw Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>79</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Warren Sinke Address: 5264 Parkway Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>80</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Carl H Smith, Jr. Address: 111 Sharpe Essexville MI 48732 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal	40.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 81 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Kellie Snyder Address: 1204 Elm Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # 82 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Richard Somalski Address: 1630 N. Southeast Boutell Essexville MI 48732 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # 83 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Marcie Sturm Address: 3165 Yorkshire Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	30.00
3. Contribution # 84 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Marlene Sundberg Address: 609 N. Trumbull Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	50.00
Page Subtotal	120.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # 85 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Ken Van Cise Address: 2351 Coralinn Court Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # 86 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Alvin Vogtmann Address: 3724 S. Euclid Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # 87 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Paul Watson Address: 871 Aplin Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # 88 PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Lyn Wegener Address: 3090 Hotchkiss Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	20.00
Page Subtotal	100.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>89</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Michael Wooley Address: 412 N. Johnson Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	10.00
3. Contribution # <u>90</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/12/2009</u> Name: Michael Wooley Address: 412 N. Johnson Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	10.00	20.00
3. Contribution # <u>91</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/13/2009</u> Name: Elaine McPhail Address: 2567 1/2 E. Hotchkiss Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # <u>92</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/17/2009</u> Name: Lisette Gibson Address: 6034 S. Saginaw road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	10.00	10.00
Page Subtotal	80.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>93</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>03/20/2009</u> Name: Eleonore Begick Address: 5828 S. 4 Mile Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	15.00	15.00
3. Contribution # <u>94</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>04/14/2009</u> Name: Edward A Beiser Address: 2500 Midland Rd Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>95</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>05/05/2009</u> Name: Stewart Reid Address: 2196 Old Hickory Dr Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>96</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/27/2009</u> Name: Melba Hoerauf Address: 6201 S Three Mile Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal	90.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>97</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/31/2009</u> Name: <u>Jerry Hoerauf</u> Address: <u>5961 Red Feather Drive</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>98</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>08/31/2009</u> Name: <u>Brian Law</u> Address: <u>1510 Kinney</u> <u>Essexville MI 48732</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # <u>99</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/01/2009</u> Name: <u>Leona Blohm</u> Address: <u>2275 S. Fraser Road</u> <u>Kawkawlin MI 48631</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>100</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/01/2009</u> Name: <u>Stewart Reid</u> Address: <u>2196 Old Hickory Dr</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	50.00
Page Subtotal	125.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>101</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/02/2009</u> Name: Edward Brengman Address: 2042 E. Hothckiss Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # <u>102</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/02/2009</u> Name: Elaine McPhail Address: 2567 1/2 E. Hotchkiss Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	75.00
3. Contribution # <u>103</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/02/2009</u> Name: Roy Schwab Address: 2516 Delta Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	50.00
3. Contribution # <u>104</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/05/2009</u> Name: Thomas Mueller Address: 3938 Bush Drive Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal	125.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>105</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/08/2009</u> Name: Kahn Leadership Fund Address: P.O. Box 5581 Saginaw MI 48603 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>106</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/09/2009</u> Name: Lorna Ittner Address: 2900 Ziegler Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	20.00	20.00
3. Contribution # <u>107</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/10/2009</u> Name: Mary Jane Gregory Address: 264 Jennison Place Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # <u>108</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/12/2009</u> Name: Dorothy Helmreich Address: 2747 Ziegler Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00	50.00
Page Subtotal	145.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>109</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/12/2009</u> Name: <u>Lois Matthes</u> Address: <u>2949 Thunderbird</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>110</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/15/2009</u> Name: <u>Nancy Engelhardt</u> Address: <u>2149 Reppuhn</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	50.00	50.00
3. Contribution # <u>111</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/15/2009</u> Name: <u>Lisette Gibson</u> Address: <u>6034 S. Saginaw road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	10.00	20.00
3. Contribution # <u>112</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/22/2009</u> Name: <u>Esther Neumeyer</u> Address: <u>7195 3 Mile Road</u> <u>Bay City MI</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal	110.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>113</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: Eldor Appold Address: 2301 E. Htchkiss Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	65.00
3. Contribution # <u>114</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: Norbert Begick Address: 6242 3 Mile Road Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	0.00	10.00
3. Contribution # <u>115</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: Paul Begick Address: 5852 S. 4 Mile Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	50.00
3. Contribution # <u>116</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: Vaughn Begick Address: 5353 Lorraine Court Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation <u>Physician Assistant</u> Employer <u>Dr James LaFleur</u> Business Address <u>3400 N Center Rd</u> <u>Saginaw MI 48603</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	160.00
Page Subtotal	75.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>117</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: <u>Earl Bovia</u> Address: <u>4526 Mocasa Court</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	30.00
3. Contribution # <u>118</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: <u>Joseph Davis</u> Address: <u>909 N Wenona</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	55.00
3. Contribution # <u>119</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: <u>Al Eichhorn</u> Address: <u>2240 Weiss st</u> <u>Saginaw MI 48602</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	35.00
3. Contribution # <u>120</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: <u>Gene Engerer</u> Address: <u>1401 Delta Rd.</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	20.00	30.00
Page Subtotal	105.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>121</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: Art Joitke Address: 4244 Two Mile Rd. Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	60.00
3. Contribution # <u>122</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: Karen Karbowski Address: 727 Bay Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	45.00
3. Contribution # <u>123</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: Terrence Kelly Address: 164 Bay Shore Drive Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	35.00
3. Contribution # <u>124</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: Greg Kimbrue Address: 622 Stanton Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal	125.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

Enter this total on
line 3a of
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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>125</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: Robert Klimmek Address: 2922 Engelhardt Road Bay City MI 48706 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	45.00
3. Contribution # <u>126</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: Keith Markstrom Address: 1383 N. Jones Essexville MI 48732 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>127</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: William Miller Address: 1642 Townline Rd. Auburn MI 48611 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>128</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: John Nyquist Address: 311 N. Grant Bay City MI 48708 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal	100.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>129</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: <u>Dennis Poirier</u> Address: <u>509 Center Avenue</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	35.00
3. Contribution # <u>130</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: <u>Bill Powell</u> Address: <u>5277 Crestway</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	35.00
3. Contribution # <u>131</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: <u>Jim Ruthig</u> Address: <u>4822 Basswood</u> <u>Saginaw MI</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	70.00
3. Contribution # <u>132</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: <u>Bob Sarow</u> Address: <u>1111 N. Water St. #201</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	25.00	35.00
Page Subtotal	125.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>133</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: <u>Kellie Snyder</u> Address: <u>1204 Elm</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	30.00	50.00
3. Contribution # <u>134</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: <u>Marlene Sundberg</u> Address: <u>609 N. Trumbull</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	100.00
3. Contribution # <u>135</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/23/2009</u> Name: <u>Alvin Vogtmann</u> Address: <u>3724 S. Euclid</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input checked="" type="checkbox"/> Fund Raiser	50.00	70.00
3. Contribution # <u>136</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/26/2009</u> Name: <u>David Huiskens</u> Address: <u>88 Tobico Beach</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
Page Subtotal	155.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)		

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Summary Page



**ITEMIZED CONTRIBUTIONS
SCHEDULE 1A
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331
2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

Enter contributor's name and address. If contribution is from an individual and the amount is \$20.01 or more, enter last name, first name, middle initial. Check box to indicate if contribution is from a Political Committee or an Independent Committee. (PAC) Report <u>all</u> contributions from committees regardless of amount.	6. Amount	7. Cumulative for Election Cycle for Each Contributor (Through date of receipt)
3. Contribution # <u>137</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/26/2009</u> Name: <u>Ward Vanderwill II</u> Address: <u>2226 - 7th St</u> <u>Bay City MI 48708</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	25.00
3. Contribution # <u>138</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>09/30/2009</u> Name: <u>Vaughn Begick</u> Address: <u>5353 Lorraine Court</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation <u>Physician Assistant</u> Employer <u>Dr James LaFleur</u> Business Address <u>3400 N Center Rd</u> <u>Saginaw MI 48603</u> Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	90.00	250.00
3. Contribution # <u>139</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>10/01/2009</u> Name: <u>James Reichard</u> Address: <u>6946 Mackinaw Road</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	50.00
3. Contribution # <u>140</u> PAC Receipt? <input type="checkbox"/> YES 4. Date of Receipt <u>11/02/2009</u> Name: <u>Edward A Beiser</u> Address: <u>2500 Midland Rd</u> <u>Bay City MI 48706</u> 5. If over \$100.00 cumulative, please provide: Occupation _____ Employer _____ Business Address _____ Type of Contribution: <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Loan from a person <input type="checkbox"/> Fund Raiser	25.00	50.00
Page Subtotal	165.00	
Grand Total of All Schedules 1A (Complete on last page of Schedule)	3297.00	

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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 1 Name: Sam's Club Address: Bay Road Saginaw MI <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>ck#1069-supplies</u> Expenditure Code <u>FE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	03/09/2009	228.47
Expenditure # 2 Name: Bay City Times Address: 311 Fifth Street Bay City MI 48708 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>ck#1070-ad in last word</u> Expenditure Code <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	03/10/2009	76.00
Expenditure # 3 Name: Barbara Jezowski Address: LFA Hall 2323 Amelith Road Frankenlust Township MI 48706 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>ck#1072-cook for spaghetti dinner</u> Expenditure Code <u>FE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	03/12/2009	160.00
Expenditure # 4 Name: LFA Hall Address: Amelith road Bay City MI 48706 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>ck#1071-hall rental</u> Expenditure Code <u>RE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	03/12/2009	175.00
Expenditure # 5 Name: Bay County Republican Party Address: Center Avenue Bay City MI 48708 <input type="checkbox"/> Fund Raiser	Purpose: <u>ck#1073-Lincoln Day Dinner</u> Expenditure Code <u>TP</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	04/28/2009	320.00
Subtotal this page			959.47
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

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**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 6 Name: U.S. Postal Service Address: Washington Avenue Bay City MI 48708 <input type="checkbox"/> Fund Raiser	Purpose: <u>Stamps</u> Expenditure Code <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	05/08/2009	126.00
Expenditure # 7 Name: Friends of B C State Rec Area Address: 3582 State Park Drive Bay City MI <input type="checkbox"/> Fund Raiser	Purpose: <u>ck#1074</u> Expenditure Code <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	06/04/2009	75.00
Expenditure # 8 Name: U.S. Postal Service Address: Washington Avenue Bay City MI 48708 <input type="checkbox"/> Fund Raiser	Purpose: <u>stamps</u> Expenditure Code <u>MA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	08/19/2009	88.00
Expenditure # 9 Name: Kingfish Restaurant Address: 1019 N Water St Bay City MI 48708 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>ck#1075</u> Expenditure Code <u>FE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	09/23/2009	115.00
Expenditure # 10 Name: Bay County Right to Life Address: 314 S Jackson Bay City MI 48708 <input type="checkbox"/> Fund Raiser	Purpose: <u>ck#1076</u> Expenditure Code <u>TP</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/03/2009	350.00
Subtotal this page			754.00
Grand Total of all Schedules 1B (Complete on last page of Schedule)			

Enter this total
on line 8a of
Summary Page



**ITEMIZED EXPENDITURES
SCHEDULE 1B
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

3. Name and address of person or vendor to whom paid	4. Purpose (Describe specific purpose and you may assign an Expenditure Code)	5. Date	6. Amount
Expenditure # 11 Name: Kingfish Restaurant Address: 1019 N Water St Bay City MI 48708 <input checked="" type="checkbox"/> Fund Raiser	Purpose: <u>ck#1077</u> Expenditure Code <u>FE</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	10/06/2009	250.00
Expenditure # 12 Name: Bay County Community Center Address: 800 J F Kennedy Dr Bay City MI 48706 <input type="checkbox"/> Fund Raiser	Purpose: <u>ck#1078-sponsor</u> Expenditure Code <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	11/09/2009	175.00
Expenditure # 13 Name: Bay City Noon Optimist Club Address: 2800 N Euclid Bay City MI 48706 <input type="checkbox"/> Fund Raiser	Purpose: <u>ck#1079-ad</u> Expenditure Code <u>PA</u> <input type="checkbox"/> Check box if this expenditure is payment of debt or obligation reported on previous statement	11/17/2009	100.00

Subtotal this page

525.00

Grand Total of all Schedules 1B
(Complete on last page of Schedule)

2238.47

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on line 8a of
Summary Page



MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

- USE A SEPARATE SHEET FOR EACH EVENT-

3. Date Event Was Held <u>03/12/2009</u> Month Day Year	4. Number of Individuals Attending or Participating (whichever is greater) 76	5. Type of Fund Raising Activity Spaghetti Dinner	6. Address and Name (If any) of the place where the activity was held LFA Hall 3/12/09 Amelith Road Bay City MI 48706 <input type="checkbox"/> Private Residence
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7. Total Contributions of \$20.00 or less 832.00

8. Total Contributions of \$20.01 or more 360.00

9. SUBTOTAL (Add lines 7 and 8) 1192.00

10. Other Receipts 0.00

11. Gross Receipts (Add lines 9 and 10) 1192.00

12. Total Cost of Event* 639.47

*Includes In-Kind Contributions and All
Expenditures Made For the Event

13. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.



MICHIGAN DEPARTMENT OF STATE
Bureau of Elections

**FUND RAISER SCHEDULE 1F
CANDIDATE COMMITTEE**

1. Committee I.D. Number 150331

2. Committee Name Committee to Elect Vaughn J. Begick Comm-
issioner

- USE A SEPARATE SHEET FOR EACH EVENT -

3. Date Event Was Held 09/23/2009 Month Day Year	4. Number of Individuals Attending or Participating (whichever is greater) 28	5. Type of Fund Raising Activity Meet the Candidate	6. Address and Name (If any) of the place where the activity was held Kingfish 9/23/09 1019 N Water St Bay City MI 48708 <input type="checkbox"/> Private Residence
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7. Total Contributions of \$20.00 or less 20.00

8. Total Contributions of \$20.01 or more 615.00

9. SUBTOTAL (Add lines 7 and 8) 635.00

10. Other Receipts 0.00

11. Gross Receipts (Add lines 9 and 10) 635.00

12. Total Cost of Event* 365.00

*Includes In-Kind Contributions and All
Expenditures Made For the Event

13. ☐ Check if event was a joint fund raiser and complete the following:

Co-Sponsor(s)	Contribution Split (%)	Expenditure Split (%)

- The committee is required to file a separate Fund Raiser Schedule for each fund raising event held during the period covered by the Campaign Statement.
- Receipts and expenditures listed on a Fund Raiser Schedule must also be reported on the Itemized Contributions Schedule (1A), Itemized In-Kind Contributions Schedule (1-IK), Itemized Expenditures Schedule (1B) and the Summary Page.
- Each committee that participated in a joint fund raiser must file a Fund Raiser Schedule for the event.